

**FINAL STATEMENT OF REASONS
FOR
PROPOSED BUILDING STANDARDS
OF THE
OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT

REGARDING THE CALIFORNIA MECHANICAL CODE
CALIFORNIA CODE OF REGULATIONS, TITLE 24, PART 4**

The Administrative Procedure Act requires that every agency shall maintain a file of each rulemaking that shall be deemed to be the record for that rulemaking proceeding. The rulemaking file shall include a final statement of reasons. The Final Statement of Reasons shall be available to the public upon request when rulemaking action is being undertaken. The following are the reasons for proposing this particular rulemaking action:

UPDATES TO THE INITIAL STATEMENT OF REASONS:

The Initial Statement of Reasons has been updated, as follows:

STATEMENT OF SPECIFIC PURPOSE AND RATIONALE:

The Office of Statewide Health Planning and Development (OSHPD) is mandated to adopt the most recent edition of model code, as amended by the Office, pursuant to Health and Safety Code Section 18928. This proposed rulemaking represents the Office's proposal to adopt the 2003 Uniform Mechanical Code (UMC) published by International Association of Plumbing and Mechanical Officials (IAPMO) and carry forward existing California amendments of the 2001 California Mechanical Code (CMC). It was also necessary to propose a few editorial and minor technical modifications to the existing requirements for clarification and consistency within the code as identified below:

CHAPTER 1

Section 108.1.1.12 is being amended for the following reason:

The Office of Statewide Health Planning and Development promulgates and enforces regulations for hospitals and skilled nursing facilities (SNFs) in California. Historically, the California Building Code has included different requirements for hospital-based skilled nursing units than it has for freestanding SNFs on a hospital license and for separately licensed SNFs.

Section 72103, Title 22, CCR, defines "skilled nursing facility" as "a health facility or a distinct part of a hospital which provides continuous skilled nursing care and supportive care to patients whose primary need is for availability of skilled nursing care on an extended basis." This definition makes no distinction between skilled nursing services that are provided as a distinct part unit in an acute care hospital, as a distinct part in a freestanding building on the hospital license, or a freestanding separately licensed SNF. Therefore, the regulations that apply to skilled nursing services should be the same, regardless of the type of facility in which the services are provided.

The purpose for this change is to make the regulations for skilled nursing facilities the same, whether the facility is a freestanding separately licensed SNF, a freestanding SNF building on a hospital license, or a distinct part SNF unit in a hospital building.

CHAPTER 3

Section 316 is being amended to provide essential mechanical requirements for "surgical" clinics only. This provision is currently being enforced pursuant to California Electrical Code Section 517-34. Including the requirement in the CMC will provide clarification and consistency with other parts of Title 24.

CHAPTER 4

Section 407.4.1.3, Exception 2. Section 407.4.1.3, exception 1, currently permits air from corridors to serve toilet rooms up to 30 square feet. However, Title 24 accessibility requirements do not permit a toilet room of 30 square feet. Since virtually all toilet rooms entered from corridors must be accessible to persons with disabilities, this exception provides no benefit for these rooms. Therefore, OSHPD is revising the exceptions to allow air from corridors to serve toilet rooms up to 50 square feet. The exception applies only to toilet rooms since there is no reason to increase the minimum size of the other small room types identified in Section 407.4.1.3, Exception No. 1. The ventilation requirements for the toilet rooms will remain the same. A sentence stating that corridors shall not convey air if the corridor is required to be of fire resistive construction was added to be consistent with a similar requirement in CMC Section 602.1.

Changes shown to 407.4.1.3, exception 2 and section 707.4.1.5 are errata items from the 2002 annual code cycle that were not published.

Section 408.1.5, Exception is being amended to clarify that dry-steam type humidifiers may be installed downstream of the "final" filter bank instead of the No. 2 filter bank. Currently, rooms of a hospital are required to have one, two or three filter banks depending on the designation/use of that room. The amendment will clarify that no matter how many filter banks are in the ventilation system the dry-steam humidifiers may be located downstream from the last filter bank. This amendment also provides for greater flexibility of HVAC design for hospitals.

An editorial change was also made to correct a typographic error, changing the word "and" to "or."

CHAPTER 5

Section 508.1. An existing amendment from Section 509.2, 2001 CMC, is being carried forward to the appropriate location in the 2003 UMC (Section 508.1).

CHAPTER 6

Section 602, Exception- Section 602, exception 1, was originally intended to repeat the requirements of CMC Section 407.4.1.3. OSHPD is proposing to delete the amendment to this section, and refer to Section 407.4.1.3 in an effort to reduce the number of amendments in the code, and eliminate confusion and maintenance problems caused by duplicate requirements.

Section 607.1.1 is being amended to indicate that the enforcement of the requirement applies to licensed clinics (OSHPD 3). This change is consistent with the enforcement of a related requirement in Section 407.4.1.4.

CHAPTER 7

Section 707.2.1 is an existing OSHPD amendment of the 2001 CMC which is no longer necessary, since the requirement is now included in the 2003 UMC.

CHAPTER 9

The following two amendments of the 2001 CMC will be carried forward and need to be relocated: Section 904.8 regarding prohibited locations for warm air furnaces and Section 912.0 regarding vented decorative appliances. Because of new/revised model code language and formatting these two amendments are being relocated as sub-items under Section 902.0-General of the 2003 UMC.

CHAPTER 11

Table 11-1, Footnote - Renumbering the existing 2001 CMC, Table 11-1 Footnote No. 14 to No. 13 will accommodate the reduced number of footnotes in the 2003 UMC Table 11-1.

MANDATE ON LOCAL AGENCIES OR SCHOOL DISTRICTS

The Office of Statewide Health Planning and Development has determined that the proposed regulatory action would not impose a mandate on local agencies or school districts.

OBJECTIONS OR RECOMMENDATIONS MADE REGARDING THE PROPOSED REGULATION(S).

(Government Code Section 11346.9(a)(3))

Comment:

Kurt A. Schaefer, Deputy Director
Office of Statewide Health Planning and Development

Mr. Schaefer recommends that OSHPD 4/04, Item 12-3 be "approved as amended". The Office is proposing an editorial change to Section 316.0 that will provide necessary clarification. The proposed regulations, as originally submitted, would require that some of the existing essential mechanical provisions of Section 316.0 would apply to "all" licensed clinics. However, this was not the intended purpose of the proposal. The intent, as clearly indicated in the "initial statement of reasons", is to specify that those requirements apply only to "surgical clinics". If this proposal is not modified, it would unnecessarily require that fans in "all" licensed clinics which maintain positive or negative air balances be supplied by emergency electrical power. This requirement, however, should only apply to surgical clinics where operating rooms must be positively pressurized for infection control and health safety. Consequently, it would be an onerous requirement for non-surgical clinics and it would not provide those clinics with any additional benefits.

Response:

The OSHPD is amending the final express terms based on this comment to clearly identify that Section 316.0 does not apply to all licensed clinics: but only "surgical clinics".

DETERMINATION OF ALTERNATIVES CONSIDERED AND EFFECT ON PRIVATE PERSONS

The Office of Statewide Health Planning and Development has determined that no alternative considered would be more effective in carrying out the purpose for which the regulation is proposed or would be as effective and less burdensome to affected private persons than the adopted regulation.

REJECTED PROPOSED ALTERNATIVE THAT WOULD LESSEN THE ADVERSE ECONOMIC IMPACT ON SMALL BUSINESSES:

There were no proposed alternatives. Additionally, the proposed regulations will not have an adverse economic impact on small business.

COMMENTS MADE BY THE OFFICE OF SMALL BUSINESS ADVOCATE

(Government Code Section 11347.6)

The Office did not receive any comments from the Small Business Advocate.

COMMENTS MADE BY THE TRADE AND COMMERCE AGENCY

(Government Code Section 11347.6)

The Office did not receive any comments from the Trade and Commerce Agency.